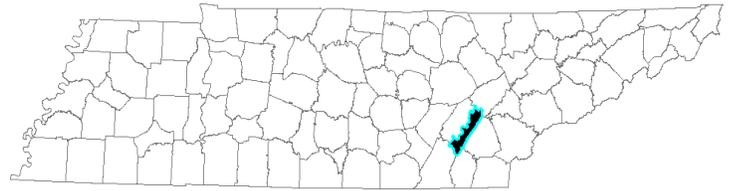
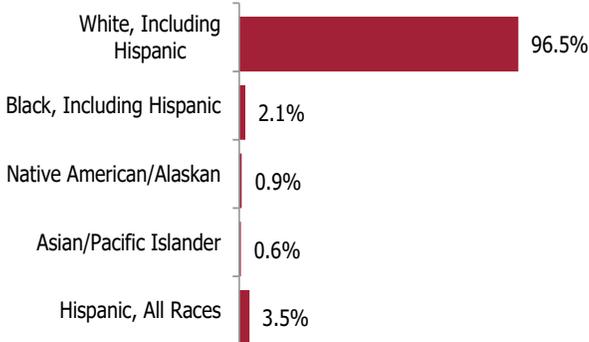


Meigs

TCCY Index Rank 44



Child Population by Race/Ethnicity



HEALTH



Low birth-weight babies

10.2%

Rank: 64 Rank: 74

Children without health insurance

5.1%

Rank: 80

Child and teen deaths

0 per 100,000

Rank: 1

ECONOMIC WELL-BEING

Rank: 50

Child Poverty

26.5%

Rank: 66

Median Household Income

\$45,695

Rank: 36

Fair Market Rent

\$885

Rank: 55

FAMILY and COMMUNITY

Rank: 55

School suspension rate

1.4%

Rank: 27

Teen pregnancy

17.1 per 1,000

Rank: 76

Substantiated Abuse and Neglect

6 per 1,000

Rank: 49

EDUCATION

Rank: 26

30.2%

Third to eighth grade reading proficiency

Rank: 56

34.9%

Third to eighth grade math proficiency

Rank: 47

98.3%

High school graduation rate

Rank: 3



Meigs County

Published 10/2019

| Demographics  | Meigs County | | Tennessee Rate | County Rate as a percentage of State Rate | County Rank |
|--|--------------|-------|----------------|---|-------------|
| | Number | Rate | | | |
| Total population (state comparison is number not rate) | 12,064 | NA | 6,715,862 | 0.2% | 83 |
| Population under 18 years of age | 2,503 | 20.7% | 22.4% | 92.8% | 56 |
| Economic Well-Being  | Meigs County | | Tennessee Rate | County Rate as a percentage of State Rate | County Rank |
| | Number | Rate | | | |
| Youth unemployment | 20 | 9.1% | 12.0% | 75.8% | 26 |
| Per capita personal income (state is dollars not rate) | \$33,347 | NA | \$45,517 | 73.3% | 64 |
| Children receiving Families First grants (TANF) | 74 | 3.0% | 3.2% | 92.7% | 42 |
| Children receiving SNAP | 1,028 | 41.1% | 31.8% | 129.3% | 70 |
| Children under five receiving WIC | 372 | 54.9% | 29.6% | 185.6% | 87 |
| Education  | Meigs County | | Tennessee Rate | County Rate as a percentage of State Rate | County Rank |
| | Number | Rate | | | |
| School age special education services | 282 | 17.0% | 11.9% | 142.9% | 90 |
| TEIS participation (per 1,000 in age group) | 4 | 9.80 | 23.4 | 41.8% | 3 |
| Cohort high school dropouts | 1 | 0.8% | 5.5% | 14.5% | 9 |
| Event high school dropouts | 3 | 0.5% | 2.6% | 19.2% | 9 |
| Economically disadvantaged students | 566 | 34.0% | 34.7% | 98.0% | 34 |
| School expulsions (per 1,000 students) | 0 | 0.0 | 2.0 | 0.0% | 1 |
| Chronic absenteeism | 199 | 12.0% | 13.6% | 88.2% | 40 |
| Health  | Meigs County | | Tennessee Rate | County Rate as a percentage of State Rate | County Rank |
| | Number | Rate | | | |
| Neonatal abstinence syndrome (per 1,000 live births) | 3 | 21.90 | 13.5 | 162.0% | 64 |
| Births to mothers who smoked during pregnancy | 41 | 29.9% | 12.7% | 235.4% | 88 |
| Children on TennCare (Medicaid) | 1,786 | 61.3% | 48.4% | 126.8% | 79 |
| Total TennCare (Medicaid) enrollees | 3,222 | 26.7% | 21.8% | 122.6% | 72 |
| Births covered by TennCare (Medicaid) | 97 | 70.8% | 52.3% | 135.4% | 76 |
| Children qualified for Medicaid/CHIP but uninsured | 89 | 5.4% | 5.5% | 98.2% | 65 |
| Infant mortality (per 1,000 live births) | 0 | 0.00 | 7.4 | 0.0% | 1 |
| Neonatal death (per 1,000 live births) | 0 | 0.00 | 4.6 | 0.0% | 1 |
| Child deaths (per 100,000 children age 1 to 14) | 0 | 0.00 | 22.4 | 0.0% | 1 |
| Teen violent deaths (per 100,000 children age 15 to 19) | 0 | 0.00 | 52.5 | 0.0% | 1 |
| Adequate prenatal care | 86 | 62.8% | 57.4% | 109.4% | 37 |
| Children under age six screened for lead poisoning | 227 | 28.0% | 17.7% | 158.3% | 6 |
| Public school students measured as overweight/obese | NA | 48.4% | 39.2% | 123.5% | 86 |
| Teens with STDs (per 1,000 children age 15 to 17) | 0 | 0.0 | 17.3 | 0.0% | 1 |
| Medical doctors by county (per 100,000 residents) | 3 | 24.9 | 239.2 | 10.4% | 86 |
| Dentists by county (per 100,000 residents) | 1 | 8.3 | 49.0 | 16.9% | 88 |
| Family & Community  | Meigs County | | Tennessee Rate | County Rate as a percentage of State Rate | County Rank |
| | Number | Rate | | | |
| Reported child abuse cases | 163 | 6.5% | 4.9% | 134.2% | 70 |
| Commitment to state custody (per 1,000 children) | 8 | 2.9 | 3.9 | 73.6% | 22 |
| Remaining in state custody (per 1,000 children) | 9 | 3.2 | 5.1 | 63.4% | 16 |
| Juvenile court referrals | 208 | 8.3% | 4.3% | 195.0% | 80 |
| Recorded marriages (per 1,000 residents) | 68 | 5.6 | 8.2 | 68.3% | 78 |
| Recorded divorces (per 1,000 residents) | 48 | 4.0 | 3.6 | 111.1% | 62 |
| Births to unmarried females | 73 | 53.3% | 43.6% | 122.2% | 85 |
| Regulated child care spaces (state is number not rate) | 123 | NA | 307,218 | 0.0% | 93 |

Meigs County

At 44th, Meigs County is in the top half of Tennessee counties in child well-being. The county's best rankings include the third-highest high school graduation rate in the state and no child and teen deaths in 2017. The county's biggest opportunities for improvement are its rate of babies born at a low birthweight and its rate of pregnancy among girls age 15 to 17.

Additional strengths include a low rate of school suspensions and comparatively high median household income.

Additional challenges include above average rates of children without health insurance and the fact that over 1 in 4 of the county's children live in poverty.

Policy/Practice/Program Options to Improve Outcomes. Many of these policies have multiple models for delivery, including public-private partnership and non-profit leadership.

- Low birthweight is a persistent and difficult problem, but improvements can occur when care is made available for chronic physical and mental health and substance abuse conditions for women of childbearing age.
- Comprehensive sex education classes that include both encouragement of abstinence and information on birth control have been shown to reduce the number of teen pregnancies.
- Most uninsured children in Tennessee qualify for either TennCare or CoverKids, so high rates of uninsured children can be improved with outreach to make sure that families are aware of these insurance opportunities. According to Census Bureau estimates, Meigs County has almost 100 children who qualify for these health insurance programs but who nonetheless lack insurance.
- With a high rate of child poverty, improving outreach to those who may qualify to receive SNAP and WIC benefits to be sure they are aware of these services can help ensure basic needs are met. Additionally, nutrition programs that provide food for school-age children to take home can contribute to food security. Expanding services through Family Resource Centers can also help reach these vulnerable populations.